

DEPARTMENT OF COMMERCE
BUREAU OF THE CENSUS

FILED JUN 3 1943

MISSOURI STATE BOARD OF HEALTH
STANDARD CERTIFICATE OF DEATH

Registration District No. _____

Primary Registration District No. 2000

State File No. _____

Registrar's No. 389

1. PLACE OF DEATH:

(a) County. **GREENE**
(b) City or town. **Springfield,**
(If outside city or town limits, write "RURAL" and name of township)
(c) Name of hospital or institution: **1250 N. Summit /**
(If not in hospital or institution, write street number or location)
(d) Length of stay: In hospital or institution. **None**
(Specify whether
In this community. **44 years**
years, months or days)

3. (a) PRINT FULL NAME **Mary Abbie Kerr**

3. (b) If veteran, name war. **None** 3. (c) Social Security No. **None**

4. Sex **Female** 5. Color or race **White** 6. (a) Single, widowed, married, divorced. **Married**

6. (b) Name of husband or wife. **John C. Kerr** 6. (c) Age of husband or wife if alive. **Unknown** years

7. Birth date of deceased. **December 2, 1872**
(Month) (Day) (Year)

8. AGE: Years **70** Months **5** Days **8** If less than one day hr. min.

9. Birthplace. **Pike County, Missouri**
(City, town, or county) (State or foreign country)

10. Usual occupation. **Housewife**11. Industry or business. **In Home**12. Name. **L. D. Pamplin**

13. Birthplace. **Unknown Virginia**
(City, town, or county) (State or foreign country)

14. Maiden name. **Unknown**
(City, town, or county) (State or foreign country)

15. Birthplace. **Unknown**
(City, town, or county) (State or foreign country)

16. (a) Informant. **John C. Kerr**
(b) Address. **Springfield, Missouri**

17. (a) **Burial** (b) Date thereof. **May 11, 1943**
(Burial, cremation, or removal) (Month) (Day) (Year)

(c) Place: burial or cremation. **East Lawn Cemetery**

18. (a) Signature of funeral director. **Alma Lohmeyer** **Funeral Home**

(b) Address. **Springfield, Missouri**

19. (a) **5-11-43** (b) **Dr. W. E. Handley**
(Date received local registrar) (Registrar's signature)

2. USUAL RESIDENCE OF DECEASED:

(a) State. **Missouri** (b) County. **Greene** **39**
(c) City or town. **Springfield,**
(If outside city or town limits, write "RURAL") **2**
(d) Street No. **1250 Summit**
(If rural, give location) **6**
(e) Citizen of foreign country? _____ (Yes or No)
If yes, name country. **1**

MEDICAL CERTIFICATION

20. DATE OF DEATH: Month **May** day **10th**
year **1943** hour **4:45 A. M.** minute _____ M. _____

21. I hereby certify that I attended the deceased from **3-12** 19**41** to **5-10** 19**43**
that I last saw him **alive** on **3-7** 19**43**
and that death occurred on the date and hour stated above.

Immediate cause of death. **Pulmonary Tuberculosis**
For Advanced **3 yrs.**
Due to _____

Due to _____
Other conditions. **Diabetes Mellitus** **3 yrs.**
(Include pregnancy within 3 months of death)

Major findings: **1361**
Of operations _____
Of autopsy _____
Underline the cause to which death should be charged statistically.

22. If death was due to external causes, fill in the following:

(a) Accident, suicide, or homicide (specify) _____
(b) Date of occurrence _____
(c) Where did injury occur? _____ (City or town) (County) (State)
(d) Did injury occur in or about home, on farm, in industrial place, in public place?

While at work? _____ (Specify type of place) (e) Means of injury _____

23. Signature **Dr. W. E. Handley** (M. D. or other) _____
Address **Springfield, Missouri** Date signed **5-12-43**

986 Licensed Embalmer's Statement on Reverse Side

WRITE PLAINLY—USE UNFADING BLACK INK—MAKE A PERMANENT RECORD

STATEMENT BY LICENSED EMBALMER

I hereby certify that the body whose name is recorded on the reverse side of this certificate was embalmed by me, or by.....

....., Registered Apprentice No.....
working under my personal supervision.

Signed

Harlow Kniskern

Licensed Embalmer No. *4065*

P. O. Address *Springfield, Ma*

Note: The above MUST BE SIGNED BY THE LICENSED EMBALMER in his OWN HANDWRITING. (Failure to comply with the above constitutes grounds for revocation of license.)

If this body is not embalmed, fact should be so stated above.